FORM D **OMB APPROVAL** UNITED STATES OMB Number: 3235-0076 SECURITIES AND EXCHANGE COMMISSION Expires: December 31, 1996 Washington, D.C. 20549 Estimated average burden RECEIVED hours per form 16.00 FORM D 2 6 2007 SEC USE ONLY NOTICE OF SALE OF SECU Prefix Serial PURSUANT TO REGULATIO SECTION 4(6), AND/OR

DATE RECEIVED

[DE]

UNIFORM LIMITED OFFERING EXEM

			•	·	
Name of Offering ([] check if this is an am	endment and name has chan	ged, and indicate	change.)		
Fundamental Partners LP; Offering of L	imited Partnership Interest	ts			
Filing Under (Check box(es) that apply):	[] Rule 504	[] Rule 505	[X] Rule 506	[]Section 4(6)	[]ULOE
Type of Filing: [X] New Filing	[] Amendment				
	A. BASIC ID	ENTIFICATION	DATA		
Enter the information requested about	the issuer				
Name of Issuer ([] check if this is an amen	dment and name has change	d, and indicate cha	inge.)		
Fundamental Partners LP					
Address of Executive Offices	(Number and Street, City,	State, Zip Code)	Telephone Number	(Including Area Cod	e)
110 West 40th Street, Suite 1201, New Y	ork, NY 10018		(212) 869-2400		
Address of Principal Business Operations	(Number and Street, City,	State, Zip Code)	Telephone Number	(Including Area Cod	e)
(if different from Executive Offices)					PROCESS
Brief Description of Business			<u>, </u>		
Investment Limited Partnership					OCT 0 1 200
					THOMSON
Type of Business Organization					EINIANCIAL
[] corporation	[X] limited partnersl	nip, already forme	i	[] other (please sp	ecify):
[] business trust	[] limited partnersh				
	-	=	ear		
Actual or Estimated Date of Incorporation of		[04]	[07]	[X] Actual	[] Estimated
Jurisdiction of Incorporation or Organization	on: (Enter two-lette	er U.S. Postal Serv	ice abbreviation for S	State:	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C 77d(6).

CN for Canada; FN for foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter [] General and/or M	[X] Beneficial Owner lanaging Partner	[X] Executive Officer	[] Director
Full Name (Last name first, if indi	vidual)			
Laurence L. Gottlieb				
Business or Residence Address (N				
110 West 40th Street, Suite 1201				
Check Box(es) that Apply:	[X] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director
	[X] General and/or N	Aanaging Partner		· · · · · · · · · · · · · · · · · · ·
Full Name (Last name first, if indi	vidual)			
Fundamental Partners GP LLC				
Business or Residence Address (N				
110 West 40th Street, Suite 120			() F	I I Di-
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director
Data Caraca	[] General and/or M	lanaging Partner		
Full Name (Last name first, if indi	*			
Fundamental GP Holdings LLC		0. 7. 0. 1)		
Business or Residence Address (N	umber and Street, City	, State, Zip Code)		
110 West 40 th Street, Suite 1201			[] Executive Officer	[] Director
Check Box(es) that Apply:	[] Promoter [] General and/or M	[] Beneficial Owner	[] Executive Officer	[] Director
Full Name (Last name first, if indi		ianaging i maio.		
(,			
Business or Residence Address (N	umber and Street, City	, State, Zip Code)		
Check Box(es) that Apply:	[] Promoter [] General and/or M	[] Beneficial Owner Ianaging Partner	[] Executive Officer	[] Director
Full Name (Last name first, if indi				
Business or Residence Address (N	umber and Street, City	, State, Zip Code)		
Check Box(es) that Apply:	[] Promoter [] General and/or M	[] Beneficial Owner	[] Executive Officer	[] Director
Full Name (Last name first, if indi		ranaging radici		
run rame (Last name mst, ir mu	viduai)			
Business or Residence Address (N	umber and Street, City	, State, Zip Code)		
<u> </u>			···	
Check Box(es) that Apply:	[] Promoter [] General and/or M	[] Beneficial Owner lanaging Partner	[] Executive Officer	[] Director
Full Name (Last name first, if indi	vidual)			
Business or Residence Address (N	umber and Street, City	, State, Zip Code)		
	(Use blank sheet	t, or copy and use additional copie	es of this sheet, as necessary.)	

															
					B. INF	ORMAT	ION AB	OUT OI	FFERIN	3					
2. WI		inimum in	vestment t	An hat will be	swer also accepted	in Append from any in	ix, Colum: ndividual?	n 2, if fili	ng under U	LOE.					
3. Do	es the offer	ring permi	t joint own	ership of a	single un	it?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							Yes	No [X]
ren age	nuneration ent of a bro	for solicita ker or deal	ation of pu ler register	rchasers in red with the	connection SEC and	on with sale Vor with a s	es of secur state or sta	ities in the tes, list th	e offe ri ng. e name of	If a persor the broker	y, any comin to be liste or dealer. I	d is an ass If more th	sociated	persor	n or sons to
	me (Last na				_										
Busines	erican Caj s or Reside	nce Addre	ss (Numb	er and Stree			ode)					• •			
	h Avenue, f Associate			rk, New Yo	ork 10 <u>151</u>						- · · · · ·				···
						11 to 12									
States in	Which Pe	rson Liste	d Has Soli	cited or Int	ends to S	olicit Purch	asers								
	(Check '	'All States	" or check	individual	States)								[]	All Sta	ites
	[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [X-IA] [NV]	[AR] [KS] [X-NH]	[CA] [KY] [NJ] [TY]	[X-CO] [LA] [NM] [UT]	[X-CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [X-MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Na	[RI] me (Last na	[SC] ime first, i	[SD] f individua	[TN] al)	[TX]	LOII	TAIL	[vv]	[WA]	[14 4]	[WI]	[** 1]	[i K]		
Ducinac	s or Reside	mon Addre	sec (Numb	er and Stree	et City S	tate 7 in C	nde)								
														_	
Name o	f Associate	d Broker o	or Dealer												
States in	n Which Pe	rson Liste	d Has Soli	cited or Int	ends to S	olicit Purcl	nasers								
	(Check '	'All States	" or check	individual	States)			•••••				·····	[]	All St	ates
E. II M.	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [M1] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
	me (Last na														
Busines	s or Reside	nce Addre	ess (Numb	er and Stre	et, City, S	tate, Zip C	ode)								
Name o	f Associate	d Broker (or Dealer					···						<u>-</u>	
States in	n Which Pe	erson Liste	d Has Soli	icited or Int	ends to S	olicit Purcl	nasers								
	(Check '	'All States	" or check	individual	States)		•••••						[]	All St	ates
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [W <u>A]</u>	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$_		\$	-0-
	Equity	\$	-0	\$	-0-
	[] Common [] Preferred				
	Convertible Securities (including warrants)	\$_	-0-	\$	-0-
	Partnership Interests	\$_	350,000,000	\$ _	141,500,000
	Other (specify)	\$_	-0-	s	
	Total	\$_	350,000,000	\$	141,500,000
	Answer also in Appendix, Column 3, if filing Under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number	Ag	gregate Dollar Amount
			Investors	· -	of Purchases
	Accredited Investors		12	. \$	141,500,000
	Non-accredited Investors		-0-	. \$	-0
	Total (for filings Under Rule 504 Only)	_	N/A	\$_	N/A
	Answer also in Appendix, Column 4 if filing under ULOE				
3.	If this filing is for an offering Under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
	Type of offering		Type of		Dollar Amount
			Security		Sold
	Rule 505	_	N/A	. \$	N/A
	Regulation A		N/A		N/A
	Rule 504	-	N/A	. \$	N/A
	Total	_	N/A	. \$_	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate				
	Transfer Agent's Fees		[]	s	-0-
	Printing and Engraving Costs				-0
	Legal Fees				50,000
	Accounting Fees				10,000
	Engineering Fees				-0
	Sales Commissions (Specify finder's fees separately)		The second secon		300,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

80,000

	C. OFFERING FRICE, NOVIDER OF INVESTO	JRS, EATER	ISLS AITD USE OF	ROCEE	
	 b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Questifference is the "adjusted gross proceeds to the issuer." 	tion 4.a. This		\$_	349,560,000
5.	Indicate below the amount of the adjusted gross proceeds to the is proposed to be used for each of the purposes shown. If the amount for a not known, furnish an estimate and check the box to the left of the estim of the payments listed must equal the adjusted gross proceeds to the issuresponse to Part C – Question 4.b above.	any purpose is late. The total			·
	response to rait C = Question 4.0 above.		Payments to Offic Directors, & Affili		Payments To Others
	Salaries and fees	1	s 1,300,000	_[] \$_	<u> </u>
	Purchase of real estate	[]	s B	_[] \$_	
	Purchase, rental or leasing and installation of machinery and equipme	ent []	sO	[] \$.	<u> </u>
	Construction or leasing of plant buildings and facilities	[]	s o	_{[] \$	o
	Acquisition of other businesses (including the value of securities in offering that may be used in exchange for the assets of securities issuer pursuant to a merger)	ies of another	s	_[] \$ _	0
	Repayment of indebtedness	[]	2 <u> </u>	_[<u> </u>
	Working capital	[]	sO	_[] \$_	0
	Other: Investments	[]	<u>\$</u>	_[/ S	348,260,000
	Column totals	[u]	,,		
	Total payments listed (column totals added)	************	(v) s 349,	60,000	<u> </u>
	D. FEDERAL S	IGNATURE			
constitu	uer has duly caused this notice to be signed by the undersigned duly authorizates an undertaking by the issuer to furnish to the U.S. Securities and Exchanger to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.				
	Print or Type) Fundamental Partners LP	Signature	au Polts	Dat	° a/12/07
	of Signer (Print or Type)	×;	millam		411210+
By: Fu	undamental Partners GP LLC, its general partner		er (Print or Type) and Chief Executiv GP LLC	e Officer o	f Fundamental
By: La	aurence L. Gottlieb				

Attention

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		· · · · · · · · · · · · · · · · · · ·		
	E. STATE SIG	NATURE		
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject provisions of such rule?		Yes	No []
	See Appendix, Column 5,	for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrate 239.500) at such times as required by state law.	tor of any state in which this notice is f	iled, a notice o	on Form D (17 CFR
	N/A			
3.	The undersigned issuer hereby undertakes to furnish to the state administrate	ors, upon written request, information	furnished by tl	ne issuer to offerees.
	N/A			
4.	The undersigned issuer represents that the issuer is familiar with the condition (ULOE) of the state in which this notice is filed and understands of establishing that these conditions have been satisfied.	ons that must be satisfied to be entitled that the issuer claiming the availability	to the Uniforn y of this exem	n limited Offering ption has the burden
	N/A			
	e issuer has read this notification and knows the contents to be true and has du norized person.	ly caused this notice to be signed on its	behalf by the	undersigned duly
Issu	er (Print or Type) Fundamental Partners LP	Signature X Joseph Patt De	Date	9/12/07
Nan	ne of Signer (Print or Type)			
Ву	Fundamental Partners GP LLC, its general partner	Title of Signer (Print or Type) Chairman and Chief Executive Partners GP LLC	Officer of F	undamental
By:	Laurence L. Gottlieb			

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

					APPENDIX						
1] :	2	3		4	4			5		
	to non-a	to Sell ccredited s in State -Item ()	ed offering price Type of investor and amount purchased in State			Type of investor and amount purchased in State (part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL	163	140		THIVESTORS	Anioun	Investors					
AK			:								
AZ			-				-				
AR					l <u></u>						
CA		-		-							
со		x	Limited Partnership Interests	1	\$4,500,000	-0-	-0-		N/A		
			\$350,000,000								
СТ		X	Limited Partnership Interests	1	\$12,350,000	-0-	-0-		N/A		
			\$350,000,000								
DE	ļ								-		
DC						-					
FL						<u></u>			<u> </u>		
GA								1	-		
HI					<u> </u>						
ID				1	. <u>-</u>						
IL	1			<u> </u>							
IA		X	Limited Partnership Interests	1	\$6,250,000	-0-	-0-		N/A		
			\$350,000,000								
KS											
KY											
LA											
ME											
MD											
MA											

-					APPENDIX					
1	:	2	3		4	ı			5	
	to non-a	to Sell ccredited s in State -Item 1)	offered in state amount purchased in State			Type of investor and amount purchased in State (part C-Item 2)				
i				Number of Accredited		Number of Non-Accredited				
State	Yes	No	· · · · · · · · · · · · · · · · · · ·	Investors	Amount	Investors	Amount	Yes	No	
ΜI										
MN		Х	Limited Partnership Interests	1	\$1,900,000	-0-	-0-		N/A	
MS	 		\$350,000,000							
МО										
MT			<u></u>				· -			
NE										
NV								· · · · · · · · · · · · · · · · · · ·		
NH		х	Limited Partnership Interests	1	\$10,000,000	-0-	-0-		N/A	
		,	\$350,000,000							
NJ						1				
NM										
NY		X	Limited Partnership Interests	6	\$105,000,000	-()-	-0-		N/A	
	<u> </u>		\$350,000,000						 	
NC										
ND										
OH				<u> </u>						
OR	1			-					<u> </u>	
OR PA		X	Limited Partnership Interests	1	\$1,500,000	-0-	-0-		N/A	
			\$350,000,000							
RI										
SC										
SD									<u> </u>	

4					APPENDIX				
1		2	3		-	4		:	5
	Intend to Sell to non-accredited investors in State (Part B-Item 1)		Type of Security and aggregate offering price offered in state (Part C-Item 1)		Type of i amount pur (part (under Sta (if yes, explan waiver	ification ate ULOE , attach ation of granted) - Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
TN		Ĭ.			-				
TX									
UT									
VT									
VA		,							
WA									
wv									
WI									
WY									
PR									